

SFLive Series Request Form

SF Live is a 22-minute, live format provided by Access SF to further promote open communication and community dialogue through public access television.

Requirements for a SF Live Series:

You are required to:

- Attend an Orientation Become an Access SF member Attend an SF Live training

Orientation date: ____/____/____ Join Date: ____/____/____ Training Date: ____/____/____
(to be completed by training facilitator)

Name: _____

Phone: _____ Email: _____

Organization: _____

Contact: _____ Phone: _____

Show Title: _____

(this will be the show title that appears during your show and in our schedule listings)

Brief Description: _____

Would you like to do your show weekly or semi-weekly? Weekly Semi-weekly

What timeslots are you available to do your show (check all that apply)?

- | | |
|--|---|
| <input type="checkbox"/> Tuesday 5:00-5:30 (Non-profits only!) | <input type="checkbox"/> Thursday 5:00-5:30 (Non-profits only!) |
| <input type="checkbox"/> Tuesday 5:30-6:00 (Non-profits only!) | <input type="checkbox"/> Thursday 5:30-6:00 (Non-profits only!) |
| <input type="checkbox"/> Tuesday 6:00-6:30 | <input type="checkbox"/> Thursday 6:00-6:30 |
| <input type="checkbox"/> Tuesday 6:30-7:00 | <input type="checkbox"/> Thursday 6:30-7:00 |
| <input type="checkbox"/> Tuesday 7:00-7:30 | <input type="checkbox"/> Thursday 7:00-7:30 |
| <input type="checkbox"/> Tuesday 7:30-8:00 | <input type="checkbox"/> Thursday 7:30-8:00 |

Do you plan to receive calls during your show? Yes No

I have read and agree to follow the *SF Live Rules and Policies*.

Signature: _____

Date: _____



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Fax: (415) 575-4945
www.accesssf.org

(Office Use Only)

Date: ____/____/____ Date attended training: ____/____/____

First show scheduled: : ____/____/____ Series Day: _____ Time: _____

Approved: _____